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FACSIMILE COVER SHEET

Deliver to: Vent, Jamie J, USPTO

Art Group: 2616

Facsimile No.: (571) 273-8300

Date: November 14, 2005

From: Roger W. Blakely, Jr., Reg. No. 25,831

Our Docket No.: 42236P068

Number of pages 29 including this sheet.

Application No.: 09/960,029

Filing Date: 9/20/2001

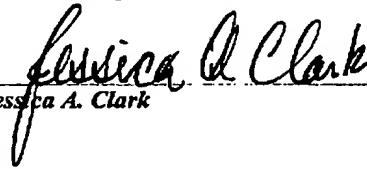
Docket Due Date(s): 11/12/2005

Enclosed are the following documents:

<input checked="" type="checkbox"/> Amendment: _____ (____ pgs)	<input type="checkbox"/> Issue Fee Transmittal
<input type="checkbox"/> Appeal Brief (____ pgs)	<input type="checkbox"/> Notice of Appeal
<input type="checkbox"/> Application: _____ (____ pgs) w/cover & abstract)	<input type="checkbox"/> Petition for: _____
<input type="checkbox"/> Assignment & Cover Sheet (____ pgs)	<input type="checkbox"/> Request for Continued Examination (RCE)
<input checked="" type="checkbox"/> Certificate of Facsimile _____	<input type="checkbox"/> Reply Brief (____ pgs)
<input type="checkbox"/> Continued Prosecution Application (CPA)	<input type="checkbox"/> Request & Certification Under 35 USC 122(b)(2)(B)(i)
<input type="checkbox"/> Declaration & POA (____ pgs)	<input type="checkbox"/> Request to Rescind Previous Nonpublication Request
<input type="checkbox"/> Drawings: ____ sheets, ____ figures	<input type="checkbox"/> Response to Notice of Missing Parts & Formalities Letter
<input type="checkbox"/> Extension of Time: _____	<input type="checkbox"/> Response to Written Opinion (____ pgs)
<input checked="" type="checkbox"/> Fee Transmittal (in duplicate)	<input type="checkbox"/> Terminal Disclaimer
<input type="checkbox"/> IDS & PTO/SB/08 (____ pgs)	<input type="checkbox"/> Transmittal of Publication Fee Due
<input checked="" type="checkbox"/> Other Copy of Previously Submitted Information Disclosure Statement & Cited Reference _____	<input checked="" type="checkbox"/> Transmittal Letter

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Jessica A. Clark 11/14/2005
Date

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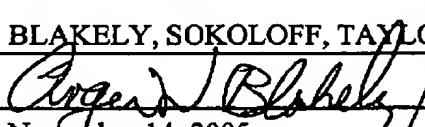
29

Application No.	09/960,029
Filing Date	September 20, 2001
First Named Inventor	Peter Holzmann
Art Unit	2616
Examiner Name	Vent, Jamie J
Attorney Docket Number	42236P068

ENCLOSURES (check all that apply)

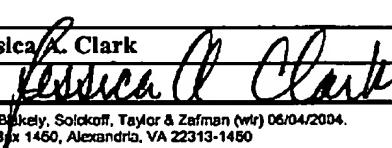
<input checked="" type="checkbox"/> Fee Transmittal Form <input type="checkbox"/> Fee Attached <input checked="" type="checkbox"/> Amendment / Response <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> PTO/SB/08 <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Response to Missing Parts/ Incomplete Application <input type="checkbox"/> Basic Filing Fee <input type="checkbox"/> Declaration/POA <input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s)	<input type="checkbox"/> After Allowance Communication to Group <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to Group (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input checked="" type="checkbox"/> Other Enclosure(s) (please identify below): <div style="border: 1px solid black; padding: 5px; margin-top: 10px;"> Copy of Previously Filed Information Disclosure Statement & Cited Reference; Facsimile Cover Sheet </div>
Remarks		

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT

Firm or Individual name	Roger W. Blakely, Jr., Reg. No. 25,831 BLAKELY, SOKOLOFF, TAYLOR & ZAFMAN LLP
Signature	
Date	November 14, 2005

CERTIFICATE OF MAILING/TRANSMISSION

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Typed or printed name	Jessica A. Clark
Signature	
Date	November 14, 2005

Based on PTO/SB/21 (04-04) as modified by Blakely, Sokoloff, Taylor & Zafman (wtr) 06/04/2004.
SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450

**FEE TRANSMITTAL
for FY 2005**

Patent fees are subject to annual revision.

Applicant claims small entity status. See 37 CFR 1.27.

Complete if Known	
Application Number	09/960,029
Filing Date	September 20, 2001
First Named Inventor	Peter Holzmann
Examiner Name	Vent, Jamie J
Art Unit	2616
Attorney Docket No.	42236P068

METHOD OF PAYMENT (*check all that apply*)

Check Credit card Money Order None Other (please identify): _____

For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)

Charge fee(s) indicated below Charge fee(s) indicated below, except for the filing fee
 Charge any additional fee(s) or underpayment of fee(s) Credit any overpayments
under 37 CFR §§ 1.16, 1.17, 1.18 and 1.20.

FEE CALCULATION

1. EXTRA CLAIM FEES

Total Claims	34	34^* =	0	X	Fee from below	=	Fee Paid
Independent Claims	8	8^* =	0	X	200.00	=	\$0.00
Multiple Dependent						=	

Large Entity		Small Entity		
Fee Code	Fee (\$)	Fee Code	Fee (\$)	Fee Description
1202	50	2202	25	Claims in excess of 20
1201	200	2201	100	Independent claims in excess of 3
1203	380	2203	180	Multiple Dependent claim, if not paid
1204	300	2204	150	**Reissue independent claims over original patent
1205	300	2205	150	**Reissue claims in excess of 20 and over original patent
SUBTOTAL (1)			(\\$)	0.00

**or number previously paid, if greater. For Reissues, see below.*

2. ADDITIONAL FEES

Large Entity Small Entity

Fee Code	Fee (\$)	Fee Code	Fee (\$)	Fee Description
1051	130	2051	65	Surcharge - late filing fee or oath
1052	50	2052	25	Surcharge - late provisional filing fee or cover
2053	130	2053	150	Non-English specification
1251	120	2251	80	Extension for reply within first month
1252	450	2252	225	Extension for reply within second month
1253	1,020	2253	510	Extension for reply within third month
1254	1,680	2254	795	Extension for reply within fourth month
1255	2,180	2255	1,080	Extension for reply within fifth month
1401	500	2401	250	Notice of Appeal
1402	500	2402	250	Filing a brief in support of an appeal
1403	1,000	2403	600	Request for oral hearing
1451	1,610	2451	1,610	Petition to Institute a public use proceeding
1460	130	2460	130	Petitions to the Commissioner
1807	50	1807	50	Processing fee under 37 CFR 1.17(q)
1806	180	1806	180	Submission of Information Disclosure Stmt
1809	790	1809	395	Filing a submission after final rejection (37 CFR 1.17(q))
1910	790	2810	395	For each additional invention to be examined

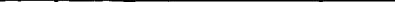
Other fee (specify)

SUBTOTAL (\$)

Fee Paid

SUBMITTED BY

Complete (if applicable)

Name (Print/Type)	Roger W. Blakely, Jr.	Registration No. (Attorney/Agent)	25,831	Telephone	(714) 557-3800
Signature				Date	11/14/05

Based on PTO/SB/17 (12-04) as modified by Blakely, Sokoloff, Taylor & Zafman (w/t) 12/15/2004.
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FEE TRANSMITTAL for FY 2005

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Applicant claims small entity status. See 37 CFR 1.27.

TOTAL AMOUNT OF PAYMENT (\$)**0.00**

<i>Complete If Known</i>	
Application Number	09/960,029
Filing Date	September 20, 2001
First Named Inventor	Peter Holzmann
Examiner Name	Vent, Jamie J
Art Unit	2616
Attorney Docket No.	42236P068

METHOD OF PAYMENT (*check all that apply*)

Check Credit card Money Order None Other (please identify): _____

For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)

Charge fee(s) indicated below

Charge any additional fee(s) or underpayment of fee(s) under 37 CFR §§ 1.16, 1.17, 1.18 and 1.20. Credit any overpayments

FEE CALCULATION

1. EXTRA CLAIM FEES

Total Claims	34	- 34* =	0	X	50.00	=	\$0.00
Independent Claims	8	- 8* =	0	X	200.00	=	\$0.00
Multiple Dependent						=	

Large Entity		Small Entity		
Fee	Fee	Fee	Fee	Fee Description
Code	(\\$)	Code	(\\$)	
1202	50	2202	25	Claims in excess of 20
1201	200	2201	100	Independent claims in excess of 3
1203	360	2203	150	Multiple Dependent claim, if not paid
1204	300	2204	150	**Reissue Independent claims over original patent
1205	300	2205	150	**Reissue claims in excess of 20 and over original patent
SUBTOTAL (1)			(\\$)	0.00

**or number previously paid, if greater. For Reissues, see below.*

2. ADDITIONAL FEES

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1262	450	2252	225	Extension for reply within second month
1253	1,020	2253	510	Extension for reply within third month
1254	1,590	2254	785	Extension for reply within fourth month
1255	2,160	2255	1,080	Extension for reply within fifth month
1401	600	2401	250	Notice of Appeal
1402	500	2402	250	Filing a brief in support of an appeal
1403	1,000	2403	600	Request for oral hearing
1451	1,510	2451	1,610	Petition to Institute a public use proceeding
1480	130	2480	130	Petitions to the Commissioner
1807	50	1807	50	Processing fee under 37 CFR 1.17(q)
1806	180	1806	180	Submission of Information Disclosure Stmt
1809	790	1809	356	Filing a submission after final rejection (37 CFR § 1.129(a))
1810	790	2810	385	For each additional invention to be examined (37 CFR § 1.129(b))

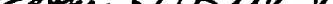
Other fee (specify)

SUBTOTAL (2)

Fee Paid

SUBMITTED BY

Complete (if applicable)

Name (Print/Type)	Roger W. Blakely, Jr.	Registration No. (Attorney/Agent)	25,831	Telephone	(714) 557-3800
Signature				Date	11/14/05

Based on PTO/SB/17 (12-04) as modified by Blakely, Sokoloff, Taylor & Zafman (wef) 12/15/2004.
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